

To: **Technology Unit: 2651**
Facsimile Number: 571-273-8300

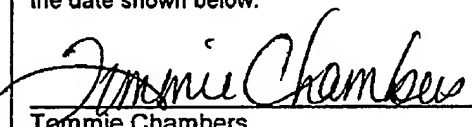
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From: **W. Daniel Swayze, Jr.**
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FACSIMILE COVER SHEET

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<table border="1"> <tr> <td colspan="2">NAME OF INVENTOR(S): Hashizume</td> <td colspan="2">RECEIPT DATE & SERIAL NO.:</td> </tr> <tr> <td colspan="2">TITLE OF INVENTION: IMPEDANCE CONTROLLED WRITE DRIVER FOR LOW POWER PREAMP</td> <td colspan="2">Serial No.: 10/731,252</td> </tr> <tr> <td colspan="2">TI FILE NO.: TI-35349</td> <td colspan="2">Filing Date: 12/9/2003</td> </tr> <tr> <td colspan="2">DEPOSIT ACCT. NO.: 20-0668</td> <td colspan="2"></td> </tr> <tr> <td colspan="2">FAXED: 12-21-05 DUE: 11/16/2005 ATTY/SEC'Y: wds/n/c</td> <td colspan="2"></td> </tr> </table>		NAME OF INVENTOR(S): Hashizume		RECEIPT DATE & SERIAL NO.:		TITLE OF INVENTION: IMPEDANCE CONTROLLED WRITE DRIVER FOR LOW POWER PREAMP		Serial No.: 10/731,252		TI FILE NO.: TI-35349		Filing Date: 12/9/2003		DEPOSIT ACCT. NO.: 20-0668				FAXED: 12-21-05 DUE: 11/16/2005 ATTY/SEC'Y: wds/n/c			
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FEE TRANSMITTAL For FY 2005

Complete if Known

Application Number	10/731,252
Filing Date	12/9/2003
First Named Inventor	Motomu Hashizume
Examiner Name	Faber
Art Unit	2651
Attorney Docket No.	TI-35349

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT \$ 1,000.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order
☒ Deposit Account ☐ None

Deposit Account Number: 20-0668
 Deposit Account Name: Texas Instruments Incorporated

The Director is authorized to: (check all that apply)

- ☒ Charge fee(s) indicated below
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FEE CALCULATION

1. BASIC FILING FEE

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
Utility Filing Fee	300	150	300
Design Filing Fee	350	175	
Plant Filing Fee	550	275	
Reissue Filing Fee	790	395	
Provisional Filing Fee	160	80	
Utility Search Fee	500	250	500
Design Search Fee	100	50	
Plant Search Fee	300	150	
Reissue Search Fee	500	250	
Provisional Search Fee	0	0	
Utility Examination Fee	200	100	200
Design Examination Fee	130	65	
Plant Examination Fee	160	80	
Reissue Examination Fee	600	300	
Subtotal (1)	\$ 0		

FEE CALCULATION (continued)

2. EXTRA CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	50	25
Each independent claim over 3	200	100
Multiple dependent claims	360	180
For Reissues, each claim over 20 and More than in the original patent	50	25
For Reissues, each independent claim More than in the original patent	200	100
Total Claims 15 -20 or HP = 0	Fee (\$) 50	Fee Paid (\$) 0
Indep. Claims 8 -3 or HP = 5	Fee (\$) 200	Fee Paid (\$) 1000.00
HP = Highest number of total claims paid for, if greater than 20		
Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)

Subtotal (2) \$ 1000.00

3. Other Fees

Fee Description	Fee (\$)	Small Entity Fee	Fee Paid (\$)
1-month extension of time	110	55	
2-month extension of time	430	215	
3-month extension of time	980	490	
4-month extension of time	1,530	765	
5 - month extension of time	2,080	1,040	
Information disclosure stmt. fee	180	180	
37 CFR 1.17(q) processing fee	50	50	
Non-English specification	130	130	
Notice of Appeal	340	170	
Filing a brief in support of appeal	340	170	
Request for oral hearing	300	150	
Other: _____	XX	XX	

Subtotal (3) \$ 0

SUBMITTED BY

Signature	Registration No. (Attorney/Agent)	34,478	Telephone (972) 917-5633
Name (Print/Type)	W. Daniel Swayze, Jr.	Date	12-21-2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THE ADDRESS. SEND TO: Commissioner of Patents, P.O. Box 1460, Alexandria, VA 22313-1460

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